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		7 00	
AI	ЭK	CD	
-	 -		

45	6	CERTIF	FICATE OF LIA	BILITY IN	SURANCE	2	DATE(MM/DD/YYYY) 11/25/2009		
	Minn 8300 Suit	Risk Services Central, Inc neapolis MN Office) Norman Center Drive :e 1000 neapolis MN 55437 USA		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONI AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.					
		N AD SD NO DOOR ADDRESS	(312) 381-0536	INSURERS AF	FORDING COVER	RAGE		NAIC#	
INSU		32) 030-0000 TAK	(312) 301-0330	INSURER A: ZU	ırich American	Ins Co		16535	
		Launch Systems Inc.		INSURER B: 07	d Republic In:	s Co		24147	fier
	Attn	n: Kelly Aubrev 1	271039 - R8 SDMS	INSURER C:				N 100 10000 1000	Holder Identifier
	MN05	5-3W	110 001110	INSURER D:			······································		r Ic
	Minn	neapolis MN 55344 USA		INSURER E:					olde
		AGES							H
AN PE AC	Y REC RTAIN GREG	LICIES OF INSURANCE LISTED BELOW I QUIREMENT, TERM OR CONDITION OF N, THE INSURANCE AFFORDED BY THE GATE LIMITS SHOWN MAY HAVE BEEN	ANY CONTRACT OR OTHER DO POLICIES DESCRIBED HEREIN I	CUMENT WITH RES	SPECT TO WHICH TH	IS CERTIFICATE MAY SIONS AND CONDITIO	BE ISSUED OR N	IAY ICIES.	
NSR LTR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE	POLICY EXPIRATION DATE(MM/DD/YYYY)		LIMITS		
В		GENERAL LIABILITY	MWZY58632	11/15/2009	11/15/2010	EACH OCCURRENCE	\$:	1,500,000	
		X COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)		\$300,000	
-		CLAIMS MADE X OCCUR				MED EXP (Any one person		Excluded	4
		 				PERSONAL & ADV INJUR	XY \$:	1,500,000	470
		GENWA ACCORDANTE LINUTE APPLICA PER				GENERAL AGGREGATE	\$:	3,000,000	069
		GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PRO- LOC JECT LOC				PRODUCTS - COMP/OP A	.gg \$3	3,000,000	570036904704
		JEC!							5
Α		AUTOMOBILE LIABILITY X ANY AUTO	BAP 9301297-08	11/15/2009	11/15/2010	COMBINED SINGLE LIMI (Ea accident)	ST \$2	2,000,000	No:
		ALL OWNED AUTOS SCHEDULED AUTOS				BODILY INJURY (Per person)			Certificate No
		X HIRED AUTOS X NON OWNED AUTOS				BODILY INJURY (Per accident)			Cer
						PROPERTY DAMAGE (Per accident)			
		GARAGE LIABILITY				AUTO ONLY - EA ACCID	ENT		
		ANY AUTO				AUTO ONLY:	ACC		
		EXCESS / UMBRELLA LIABILITY				EACH OCCURRENCE			
		OCCUR CLAIMS MADE				AGGREGATE	4		

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS Certificate Holder is an Additional Insured as respects to written contract.

CEF	CI	IF.	IC	41	E	H	o	LD	E	R	
							-392-4				

OTHER

US Environmental Protection Agency

Attn: Tien Nguyen 1595 Wynkoop Street Denver CO 80202 USA

DEDUCTIBLE RETENTION

WORKERS COMPENSATION AND EMPLOYERS' LIABILITY

ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)

If yes, describe under SPECIAL PROVISIONS below

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

WC STATU-TORY LIMITS

E.L. EACH ACCIDENT

E.L. DISEASE-EA EMPLOYEE E.L. DISEASE-POLICY LIMIT

AUTHORIZED REPRESENTATIVE

Non	Risk Services	Contral In
-	Como Como	Community C

отн-



CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY) 11/14/2012

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to

RODUÇER			CONTACT NAME: PHONE (A/C. No. Ext): (866) 283-7122 (A/C. No.): (847) 953-5390					
on Risk Services Central, Inc. inneapolis MN Office								
600 West 83rd Street 200 Tower, Suite 1100			E-MAIL ADDRESS:					
inneapolis MN 55437 USA				INSU	JRER(S) AFFOI	RDING COVERAGE	NAIC#	
SURED			INSURER	A: ACE A	merican In	surance Company	22667	
TK Launch Systems Inc.			INSURER		and production that the control of t			
TTN: Jennifer Anderson 480 Flying Cloud Drive			INSURER	D:				
NO5-3W			INSURER):				
inneapolis MN 55344 USA			INSURER	z.	-			
			INSURER					
OVERAGES CERT	TEICATE	NUMBER: 570048207			RF	VISION NUMBER:		
THIS IS TO CERTIFY THAT THE POLICIES INDICATED. NOTWITHSTANDING ANY RECERTIFICATE MAY BE ISSUED OR MAY PEXCLUSIONS AND CONDITIONS OF SUCH	QUIREME ERTAIN,	NT, TERM OR CONDITION THE INSURANCE AFFOR S. LIMITS SHOWN MAY HA	N OF ANY (RDED BY TH AVE BEEN I	CONTRACT HE POLICIES REDUCED B	OR OTHER D S DESCRIBE	OCCUMENT WITH RESPECT TO HEREIN IS SUBJECT TO	T TO WHICH THIS ALL THE TERMS, we are as requeste	
A GENERAL LIABILITY	INSK WVL	HD0G27015013		1/15/2012	11/15/2013	EACH OCCURRENCE	\$2,000,00	
X COMMERCIAL GENERAL LIABILITY				~ ~		DAMAGE TO RENTED	\$300,00	
CLAIMS-MADE X OCCUR						PREMISES (Ea occurrence) MED EXP (Any one person)	Exclude	
CLAIMS-WADE X OCCUR						PERSONAL & ADV INJURY	\$2,000,00	
						GENERAL AGGREGATE	\$4,000,00	
						PRODUCTS - COMP/OP AGG	\$4,000,00	
GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PRO- LOC						TROBUSTO SOME FOR AGE	\$1,000,00	
AUTOMOBILE LIABILITY		ISA H08712396		11/15/2012	11/15/2013	COMBINED SINGLE LIMIT (Ea accident)	\$3,000,00	
AND AND AUTO	8					BODILY INJURY (Per person)		
X ANY AUTO SCHEDULED						BODILY INJURY (Per accident)		
AUTOS AUTOS						PROPERTY DAMAGE		
X HIRED AUTOS X NON-OWNED AUTOS		1				(Per accident)		
UMBRELLA LIAB OCCUR						EACH OCCURRENCE		
EXCESS LIAB CLAIMS-MADE			ĺ			AGGREGATE	, , , , , , , , , , , , , , , , , , , ,	
DED RETENTION		1						
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATU- OTH- TORY LIMITS ER		
ANY PROPRIETOR / PARTNER / EXECUTIVE						E.L. EACH ACCIDENT		
OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A					E.L. DISEASE-EA EMPLOYEE		
If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE-POLICY LIMIT		
ESCRIPTION OF OPERATIONS / LOCATIONS / VEHICL					equired)	t en		
ertificate Holder is an Additional	Insure	d as respects to wri	itten cont	ract.				
		Luie				<u> </u>		
ERTIFICATE HOLDER		C/	ANCELLA	TION				
				DATE THERE		IBED POLICIES BE CANCELL IILL BE DELIVERED IN ACCOR		
US Environmental Protection	Agency	AU	THORIZED RE	PRESENTATIV	E			
Attn: Tien Nguyen 1595 Wynkoop Street	1	A Bild Said Entel						

Aon Prisk Services Central Inc.



CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY) 11/14/2013

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER		CONTACT NAME: PHONE (A/C. No. Ext): (866) 283-7122 E-MAIL ADDRESS: FAX (A/C. No.): (800) 363-0105					
Aon Risk Services Central, Inc. Minneapolis MN Office 5600 West 83rd Street 8200 Tower, Suite 1100 Minneapolis MN 55437 USA	Inc.						
			INSURER(S	AFFORDING CO	VERAGE	NAIC#	
INSURED		INSURER A:	ACE Americ	an Insurance	Company	22667	
ATK Launch Systems Inc.		INSURER B:					
Alliant Techsystems Inc. 7480 Flying Cloud Drive		INSURER C:					
MN05-3W		INSURER D:					
Minneapolis MN 55344 USA		INSURER E:	NOT PROGRESS STREET HOSPITATION		war recorded to the recorded		
		INSURER F:					
COVEDACEC	CERTIFICATE MUMPER, 5700520000	EO.		DEVICION	MIMDED.		

COVERAGES	CERTIFICATE NUMBER: 570052000950	REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, FXCI USIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

	CEUSIONS AND CONDITIONS OF SUCH						Limits snow	n are as requested
INSR LTR	TYPE OF INSURANCE	ADDL	SUBR	POLICY NUM		POLICY EXP (MM/DD/YYYY)	LIMITS	
Α	GENERAL LIABILITY			HD0G27327709	11/15/2013	11/15/2014	EACH OCCURRENCE	\$3,000,000
	X COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$300,000
	CLAIMS-MADE X OCCUR						MED EXP (Any one person)	Excluded
							PERSONAL & ADV INJURY	\$3,000,000
		Ì					GENERAL AGGREGATE	\$6,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG	\$3,000,000 \$6,000,000 \$6,000,000
	Y POLICY PRO-							90
A	AUTOMOBILE LIABILITY			ISA H08815094	11/15/2013	11/15/2014	COMBINED SINGLE LIMIT (Ea accident)	\$3,000,000
	X ANY AUTO						BODILY INJURY (Per person)	9
	ALL OWNED SCHEDULED	ŀ		p		,	BODILY INJURY (Per accident)	
	X HIRED AUTOS X NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	900
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	
	DED RETENTION							
-	WORKERS COMPENSATION AND						WC STATU- OTH- TORY LIMITS ER	
	EMPLOYERS' LIABILITY Y/N			į.			E.L. EACH ACCIDENT	
	ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A					E.L. DISEASE-EA EMPLOYEE	
	(Mandatory in NH) If yes, describe under						E.L. DISEASE-POLICY LIMIT	
	DÉSCRIPTION OF OPERATIONS below	-	<u> </u>				E.L. DISEASE-POLICE LIMIT	
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (A	tach A	CORD 101, Additional Ren	narks Schedule, if more space is r	equired)	<u> </u>	
Cer	tificate Holder is an Additiona	Ins	urec	as respects to	written contract.			
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l								
								5.00
CEI	RTIFICATE HOLDER				CANCELLATION			5. M.
							IBED POLICIES BE CANCELLED ILL BE DELIVERED IN ACCORDA	

CERTIFICATE HOLDER

CANCELLATION

US Environmental Protection Agency Attn: Tien Nguyen 1595 Wynkoop Street Denver CO 80202 USA

AUTHORIZED REPRESENTATIVE

An Risk Services Central Inc



8300 Norman Center Drive, Suite 1000 Minneapolis, MN 55437-1027